

Provider Assessment Summary

Assessment Input Parameters

Assessable Provider Options		# of Homes Excluded	
<input type="button" value="Include"/>	State Operated Providers	<input type="text" value="0"/>	Total (Unduplicated) # of Homes Excluded <input type="text" value="0"/>
<input type="button" value="Include"/>	Hospital Based LTCU	<input type="text" value="0"/>	
<input type="button" value="Include"/>	NF-MH	<input type="text" value="0"/>	
<input type="button" value="Include"/>	Government Owned Facilities	<input type="text" value="0"/>	
<input type="button" value="Include"/>	Continuing Care Ret. Comm. (CMS defined)	<input type="text" value="0"/>	

Assessment Basis Options		Assessment Basis
Beds	Assessment Rates	Revenue Test
	<input type="text" value="\$725.00"/> < 500	<input type="text" value="1.50%"/>
	<input type="text" value="\$725.00"/> 500 < Mdcd Days < 30000	
	<input type="text" value="\$600.00"/> > 30000	
	<input type="text" value="\$0.00"/> State Operated	
	<input type="text" value="\$0.00"/> NF-MH	
<input type="text" value="23,093"/> Total Assessable Beds	<input type="text" value="\$691.69"/> Average Assessment Rate	<input type="text" value="15,973,175"/> Revenue Generated

Statistical Tests		P1/P2	B1/B2
P1	0.54	B1	0.0000001659
P2	0.53	B2	0.0000001536
P1/P2	1.011888	B1/B2	1.079582

Provider Assessment Summary

Assessment Revenue Use

Assessment Revenue Distribution Options					
		Assessment Contribution	FMAP Rate	Total New Program Funds	Net New Funds
0%	Non-Medicaid Programs	0	N/A	0	0
0%	Non-LTC Medicaid Programs	0	40.08%	0	0
15%	Medicaid Home and Community Based Services	2,395,976	40.08%	5,977,985	3,582,008
40%	Medicaid Nursing Facility Program Base Maintenance	6,389,270	40.08%	15,941,292	9,552,022
45%	Medicaid Nursing Facility Program - Quality Enhancements	7,187,929	40.08%	17,933,954	10,746,025
	Totals	15,973,175		39,853,231	23,880,056

NF Program Use and Impact

NF Reimbursement Program Adjustments					
Remove 85% Occupancy Rule	for homes with		Total Benefit	Homes Impacted	Subject to PPL
	< 200 beds	Yes	2,448,479	61	Yes
Cost Center Limit Adjustments					
Operating Cost Center Limit Increase		0.00%	0	0	Yes
IDHC Cost Center Limit Increase		0.00%	0	0	Yes
DHC Cost Center Limit Increase		0.00%	0	0	Yes
Inflate the Real and Personal Property Fee					
Additional Inflation			-	0	Yes
New Limit		8.62			
Pass-Through Medicaid Share of Assessment		Yes	8,454,383	316	No
Apply Inflationary Increase					
Inflation Factor		3.16%	16,273,206	324	Yes
Increased Funding for Current Incentive or Other Outcomes-Based Measure					
Increase to Current Incentive		250.00%	5,207,138	255	No
Funding for Statewide Satisfaction Survey Program					
PPD/RFP Limit		0.26	1,000,000	324	No

Provider Assessment Summary

NF Program/Provider Fiscal Impact Analysis

Total Increase to NF Program Expenditures **33,383,205.42**

Net Increase to NF Program Expenditures **17,410,030.42**

Number of Providers with Net Gain **314**

Avg Gain **57,408**

Max Gain **279,291**

Number of Providers with Net Loss **28**

Avg Loss **-22,669**

Max Loss **-76,850**

Number of Providers with 0 Impact **2**

The Losers

#	Loss	(avg)	Avg % Medicaid	Avg # of Beds
28	-\$22,669		13%	52
4	over \$40k		0%	82
9	\$20-\$40k		10%	66
15	under \$20k		19%	36

The Winners

#	Gain	(avg)	Avg % Medicaid	Avg # of Beds
314	\$57,408		57%	68
186	up to \$50k		51%	56
78	\$50-\$100k		62%	76
50	over \$100k		70%	103

The Average

#	Avg Gain	(avg)	Avg % Medicaid	Avg # of Beds
344	\$50,556		53%	67